

# COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

Date/Time RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

2019 DEC 12 PM 1:48

**Instructions:** Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. **Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.**

**SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING**

Name of Traveler: Patrick Warren

Employing Office/Committee: Senate Permanent Subcommittee on Investigations

Travel Expenses Paid by (List all sources): Partnership for a Secure America

Travel Date(s): November 9-10, 2019

Description/Title of Attached Forms: RE-1, Personalized invitation

Purpose of Amendment (describe the reason for amending original submission): Failed to submit amended RE-1 form and personalized invitation.

12/12/2019

(Date)

Patrick Warren

(Signature of Traveler)

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# EMPLOYEE PRE-TRAVEL AUTHORIZATION

Date/Time Stamp:  
ETHIC OCT 2 19PM 3:25

**Pre-Travel Filing Instructions:** Complete and submit this form at least 30 days prior to the travel departure date to the Select Committee on Ethics in SH-220. Incomplete and late travel submissions will not be considered or approved. This form must be typed and is available as a fillable PDF on the Committee's website at [ethics.senate.gov](http://ethics.senate.gov). Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

Patrick Warren

Name of Traveler: \_\_\_\_\_

Senate Permanent Subcommittee on Investigations

Employing Office/Committee: \_\_\_\_\_

Partnership for a Secure America

Private Sponsor(s) (list all): \_\_\_\_\_

November 9-November 10, 2019

Travel date(s): \_\_\_\_\_

*Note: If you plan to extend the trip for any reason you must notify the Committee.*

Warrenton, VA

Destination(s): \_\_\_\_\_

Explain how this trip is specifically connected to the traveler's official or representational duties:

This trip is relevant to my official duties because the matters discussed at the conference will allow me to sharpen my understanding of the most significant U.S. national security issues. The trip will also help build relationships with staffers from across the aisle and help me to appreciate the compromise necessary to resolve these difficult questions.

Name of accompanying family member (if any): \_\_\_\_\_ N/A

Relationship to Employee: ☐ Spouse ☐ Child

I certify that the information contained in this form is true, complete and correct to the best of my knowledge:

9/30/19

(Date)

*Patrick Warren*

(Signature of Employee)

TO BE COMPLETED BY SUPERVISING SENATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, Secretary for the Majority, Secretary for the Minority, and Chaplain):

Sen. Rob Portman

Patrick Warren

I, Sen. Rob. Portman hereby authorize \_\_\_\_\_  
(Print Senator's/Officer's Name) (Print Traveler's Name)

an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain.

I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate. (signify "yes" by checking box) ☐

9/30/19

(Date)

*Rob Portman*

(Signature of Supervising Senator/Officer)



## PARTNERSHIP FOR A SECURE AMERICA

Dear Patrick Warren,

On behalf of Partnership for a Secure America (PSA), it is our pleasure to inform you that you have been accepted to join the fall 2019 Congressional Partnership Program (CPP). The session will begin on **Monday, September 16<sup>th</sup>** with an evening orientation from 6:00pm to about 8:00pm. Location is TBA.

*Please review the following event schedule and let us know if you have any conflicts.* In order to fully benefit from the program, it is important that you participate in the majority of the activities – with mandatory attendance for the weekend retreat at Airlie Conference Center.

Note that you have to submit ethics forms to attend the retreat. Please confirm with your office to ensure this is acceptable under your travel policy. If not, please let us know.

<b>Orientation</b>	Monday, September 16 <sup>th</sup> 6:00pm–8:30pm
<b>Negotiation Seminar</b>	Monday, September 30 <sup>th</sup> & Tuesday, October 1 <sup>st</sup> 5:30pm–9:00pm <i>**Timing may be subject to change**</i>
<b>Dinner #1</b>	Tuesday, October 15 <sup>th</sup> 6:30–9:00pm
<b>Dinner#2</b>	Monday, October 28 <sup>th</sup> 6:30–9:00pm
<b>Retreat Conference at Airlie</b>	Saturday, November 9 <sup>th</sup> : 1:30pm Departure Sunday, November 10 <sup>th</sup> : 6:30pm Return
<b>Dinner #3 Final</b>	Monday, November 18 <sup>th</sup> 6:30–9:00pm

Please reply back to this email by COB Friday, September 6th to confirm your participation. If you have any questions, email us at [cpp@psaonline.org](mailto:cpp@psaonline.org) or call 202-293-8580.

Congratulations, and we look forward to your participation in the CPP!

Sincerely,

PARTNERSHIP FOR A SECURE AMERICA